Fill	n this informa	ation to identify your	case:				
Deb		Tori Bianca Buch					
D - I	10	First Name	Middle Name	Last Name			
	tor 2 ise if, filing)	First Name	Middle Name	Last Name			
Unit	ed States Bank	kruptcy Court for the:	EASTERN DISTRICT	OF MICHIGAN			
Cas	e number 19	9-52563					
(if kno	· · · · · <u>- · ·</u>					_	if this is an
						amend	ded filing
~		4000					
		<u>m 106Sum</u>		u d Oantain Otatiatiaa	l lada atta	_	
				nd Certain Statistica e are filing together, both are e		-	2/15
infor	mation. Fill oເ	ut all of your schedul	es first; then complete t	he information on this form. If	you are filing amend		
your	original form	s, you must fill out a	new <i>Summary</i> and ched	ck the box at the top of this pag	ge.		
Part	1: Summa	rize Your Assets					
						Your as	ssets f what you own
	Calaaduda A/I	D. Duamantus (Official E	4 OC A /D)			value o	i what you own
1.	1a. Copy line	3: Property (Official Fo 55, Total real estate, f	rom Schedule A/B			\$	0.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B			\$	11,597.77
	1c. Copy line	63, Total of all propert	y on Schedule A/B			\$	11,597.77
Part	2: Summa	rize Your Liabilities					
						Your lia	
						Amount	you owe
2.			laims Secured by Propert mn A, Amount of claim, at	y (Official Form 106D) t the bottom of the last page of Pa	art 1 of Schedule D	\$	0.00
3.			Unsecured Claims (Official (priority unsecured claims)	al Form 106E/F) ms) from line 6e of <i>Schedule E/F</i> .		\$	1,500.00
	. ,		,	claims) from line 6j of <i>Schedule E</i>		\$	17,280.86
	ob. copy the	total olalino nomi rait	z (nonphony anoccarca	olamo, nom imo oj or concado 2	<u></u>	<u> </u>	17,200.00
					Your total liabilities	\$	18,780.86
Part	3: Summa	rize Your Income and	Expenses				
4.		our Income (Official Fo		'e I		\$	4,840.09
5.	Schedule J: Y	our Expenses (Official	Form 106J)				
-						\$	4,798.00
	Copy your me						
Part		These Questions for	Administrative and Sta	tistical Records			
Part 6.	4: Answer Are you filing	g for bankruptcy und	er Chapters 7, 11, or 13		rm to the court with yo	ur other sch	edules.

7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

\$ 6,842.96

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,500.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	1,500.00

Debtor 1	Tori Bianca Buchanan First Name Mi	ddle Name Last Name		
ebtor 2	, not really	2001.10		
Spouse, if filing)	First Name Mi	ddle Name Last Name		
nited States Ba	ankruptcy Court for the: EASTER	RN DISTRICT OF MICHIGAN		
ase number	19-52563			☐ Check if this is a
	10 02000			amended filing
official Fo	orm 106A/B			
				40/45
	le A/B: Property	ist an asset only once. If an asset fits in more than one	Part II	12/15
art 1: Describe Do you own or	stion. Each Residence, Building, Land, or have any legal or equitable interest i	e sheet to this form. On the top of any additional pages Other Real Estate You Own or Have an Interest In In any residence, building, land, or similar property?	,	oo namee (a vicenty)
No. Go	to Part 2.			
☐ Yes. W	/here is the property?			
.1		What is the property? Check all that apply	Do not deduct secured of	claims or exemptions. Put
Street address	, if available, or other description	— ☐ Single-family home	the amount of any secur	ed claims on Schedule D: nims Secured by Property.
Street address,	, ii available, or other description	☐ Duplex or multi-unit building	Current value of the	Current value of the
City	State ZIP Code	Condominium or cooperative	entire property? \$	portion you own? \$
		☐ Manufactured or mobile home		
		☐ Land		
		☐ Investment property		
		☐ Timeshare		
		Other		your ownership interest
		Who has an interest in the property? Check one	(such as fee simple, te a life estate), if known.	nancy by the entireties, o
		☐ Debtor 1 only		
		Debtor 2 only		
County		Debtor 1 and Debtor 2 only	 Check if this is con 	mmunity property
County		☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Check if this is contact (see instructions)	mmunity property
County		_	(see instructions)	mmunity property

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1	Tori Bianca I	Buchanan	Case number (if known)	19-52563
		or homes, ATVs and other recreational vehicles, other vehicles, motors, personal watercraft, fishing vessels, snowmobiles, motorcyc		
■ No				
☐ Yes				
		the portion you own for all of your entries from Part 2, including ed for Part 2. Write that number here		\$0.00
Part 3: D	escribe Your Person	nal and Household Items		
Do you o	own or have any le	egal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exam</i> _l □ No	hold goods and function when the control of the con	urnishings ces, furniture, linens, china, kitchenware		
		Various household goods and furnishings		
		Location: 8268 Continental Ave., Warren MI 48089		\$1,400.00
□ No	ples: Televisions ar	nd radios; audio, video, stereo, and digital equipment; computers, pri phones, cameras, media players, games	inters, scanners; music co	ollections; electronic devices
		Various household electronics Location: 8268 Continental Ave., Warren MI 48089		\$700.00
		figurines; paintings, prints, or other artwork; books, pictures, or other ons, memorabilia, collectibles	art objects; stamp, coin,	or baseball card collections;
☐ Yes	s. Describe			
	ment for sports ar oles: Sports, photog musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes a	and kayaks; carpentry tools;
	s. Describe			
10. Firea Exan		s, shotguns, ammunition, and related equipment		
☐ Yes	s. Describe			
11. Cloth <i>Exan</i> □ No		othes, furs, leather coats, designer wear, shoes, accessories		
■ Yes	s. Describe			
		Various articles of used clothing Location: 8268 Continental Ave., Warren MI 48089		\$150.00
☐ No		velry, costume jewelry, engagement rings, wedding rings, heirloom je	ewelry, watches, gems, g	old, silver

Schedule A/B: Property page 2 Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com 19-52563-pjs Doc 13 Filed 09/12/19 Entered 09/12/19 19:07:59 Page 4 of 41 Best Case Bankruptcy

Official Form 106A/B

	Tori Bianca	Buchan	nan	Case number (if known)	19-52563
			us rings, earrings, nec Illaneous jewelry	klaces, bracelets, watches and other	\$25.00
	on-farm animals examples: Dogs, cats,	birds, ho	rses		
	Yes. Describe by other personal an	d house	hold items you did not al	Iready list, including any health aids you did not list	
1 🗖	No Yes. Give specific inf	ormation			
			-	including any entries for pages you have attached	\$2,275.00
Part 4:	Describe Your Finan	cial Asse	ts		
			equitable interest in any o	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	<i>xamples:</i> Money you No	·	our wallet, in your home, in	n a safe deposit box, and on hand when you file your petit 	55.00
E	institutions.			certificates of deposit; shares in credit unions, brokerage the same institution, list each.	houses, and other similar
□ n	vo Yes			Institution name:	
		17.1.	Checking	Christian Financial Credit Union Balance approximate on date of filing	\$15.00
		17.2.	Membership Share Account	Christian Financial Credit Union Balance approximate on date of filing	\$2.50
		17.3.	Savings	Christian Financial Credit Union Balance approximate on date of filing	\$0.00
	•			ge firms, money market accounts	
			Institution or issuer name		
1 🗖	res		institution of issuer frame	•	
□ \ 19. No	n-publicly traded st	ock and		d and unincorporated businesses, including an interes	st in an LLC, partnership, and

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1	Tori Bianca Buchana	n		Case number (if known)	19-52563
	■ No					
		Give specific information al	oout them er name:			
21.		ment or pension accounts oles: Interests in IRA, ERIS		, 403(b), thrift savings accounts, or other po	ension or profit-sharing p	plans
	Yes.	List each account separate Type of	ly. account:	Institution name:		
		Thrift	Saving	Thrift Savings Plan through	employer	\$6,694.94
22.	Your s		you have made:	so that you may continue service or use front, public utilities (electric, gas, water), telec		uies, or others
	_			Institution name or individual:		
		Secur	ity Deposit	Security Deposit on hand w	ith landlord	\$350.00
	■ No			ney to you, either for life or for a number of	i years)	
	☐ Yes	lssuer name	and description.			
24.		ts in an education IRA, in C. §§ 530(b)(1), 529A(b), a		qualified ABLE program, or under a qua	alified state tuition pro	gram.
	☐ Yes	Institution na	ime and descripti	ion. Separately file the records of any interest	ests.11 U.S.C. § 521(c):	
	■ No	, equitable or future intere		(other than anything listed in line 1), and	d rights or powers exe	rcisable for your benefit
	Patent	s, copyrights, trademarks	, trade secrets,	and other intellectual property eeds from royalties and licensing agreeme	-4-	
	■ No	Give specific information a	, ,,	eeus nom royalies and licensing agreeme	its	
27.	_Examp	es, franchises, and other oles: Building permits, exclu		bles operative association holdings, liquor licen	ses, professional license	es
	■ No □ Yes.	Give specific information a	bout them			
M	oney or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No	funds owed to you Give specific information al	oout them, includ	ing whether you already filed the returns an	nd the tax years	
			Ma	ated 2019 Income Tax Refund rket Value based on prorated 2018 ome Tax Refund	Federal	\$1,755.33
				ated 2019 Income Tax Refund rket Value based on prorated 2018		
				ome Tax Refund	State	\$500.00

Official Form 106A/B Schedule A/B: Property page 4

De	ebtor 1	Tori Bianca I	Buchanan	Case number (if known)	19-52563
29.		support			
	■ No	oles: Past due or l	lump sum alimony, spousal support, child support, ma	aintenance, divorce settlement, property	settlement
	— 103.	Olve specific fillo	maion		
30.	Examp		ne owes you es, disability insurance payments, disability benefits, so paid loans you made to someone else	sick pay, vacation pay, workers' compe	nsation, Social Security
	■ No □ Yes.	Give specific info	ormation		
31.		sts in insurance poles: Health, disab	policies polity, or life insurance; health savings account (HSA);	credit, homeowner's, or renter's insura	nce
		Name the insurar	nce company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
			Term life insurance through employer Policy has no cash surrender value	Alfonza Abdullah-Buchanan	\$0.00
32.	If you a someo		y that is due you from someone who has died y of a living trust, expect proceeds from a life insurance ormation	ce policy, or are currently entitled to rec	eive property because
33.	Examp ■ No		arties, whether or not you have filed a lawsuit or m mployment disputes, insurance claims, or rights to su		
34.			ınliquidated claims of every nature, including cou	nterclaims of the debtor and rights to	set off claims
•	■ No	Describe each c			
35.		nancial assets yo	ou did not already list		
	■ No □ Yes.	Give specific info	ormation		
36			of all of your entries from Part 4, including any ent		\$9,322.77
Pa	rt 5: Des	scribe Any Busine	ss-Related Property You Own or Have an Interest In. List	any real estate in Part 1.	
	-	-	gal or equitable interest in any business-related property	y?	
		o to Part 6. Go to line 38.			
					Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accou	nts receivable o	r commissions you already earned		
	□ No □ Yes.	Describe			

Official Form 106A/B Schedule A/B: Property page 5

Del	otor 1	Tori Bianca l	Buchanan	Case number (if known)	19-52563
39.			ishings, and supplies lated computers, software, modems, printers, copiers, fax machines	s, rugs, telephones, desks, o	chairs, electronic devices
	□ No □ Yes.	Describe			
40.	Machir	nery, fixtures, eq	quipment, supplies you use in business, and tools of your trade	e	
	□ No □ Yes.	Describe			
41.	Invent	tory			
	□ No □ Yes.	Describe			
42.	Interes	sts in partnership	ps or joint ventures		
	□ No □ Yes.	Give specific info	ormation about them Name of entity:	% of ownership:	
				%	
	Custor No.	mer lists, mailinຸດ	g lists, or other compilations		
	Do you	ur lists include per	rsonally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
		□ No □ Yes. Describe	3		
]
44.	Any bu	usiness-related p	property you did not already list		
	□ No □ Yes.	Give specific info	ormation		
45	Add t	the dollar value o	of all of your entries from Part 5, including any entries for page	es you have attached	
10.			number here		
Par			and Commercial Fishing-Related Property You Own or Have an Interest interest in farmland, list it in Part 1.	In.	
46.		J own or have ar Go to Part 7.	ny legal or equitable interest in any farm- or commercial fishing	g-related property?	
		Go to Part 7. Go to line 47.			
	⊔ Yes	s. Go to line 47.			Current value of the portion you own? Do not deduct secured
	_				claims or exemptions.

47. **Farm animals** *Examples:* Livestock, poultry, farm-raised fish

Official Form 106A/B Schedule A/B: Property page 6

Debt	tor 1 Tori Biand	a Buchanan		Case number (if known)	19-52563
_	l No				
	l Yes				
					-
48. C	Crops—either grow	ing or harvested			
_					
	l No	afa was ation			
_	Yes. Give specific i	niormation			
49 F	arm and fishing eg	uipment, implements, machinery, fixtures,	and tools of trade		
10. 1	arm and norming oq	parpriorit, implemento, maerino, y, mataroe,			
	l No				
] Yes				
50. F	arm and fishing su	pplies, chemicals, and feed			
	l No				
] Yes				
51. A	Any farm- and comr	nercial fishing-related property you did not	already list		
_	1				
	l No l Yes. Give specific i	nformation			
_	res. Oive specific i				
52.		ue of all of your entries from Part 6, includin at number here			
	Torractor write th				
Part	7: Describe All	Property You Own or Have an Interest in That You	ı Did Not List Above		
		property of any kind you did not already list ckets, country club membership	?		
	l _{No}	ckets, country club membership			
	l Yes. Give specific i	nformation			
				,	
54.	Add the dollar valu	ue of all of your entries from Part 7. Write th	at number here		\$0.00
Part	8: List the Totals	of Each Part of this Form			
55	Part 1: Total roal o	state, line 2			\$0.00
55. 56	Part 2: Total vehic	·			\$0.00
56. 57.		nal and household items, line 15	\$0.00 \$2,275.00		
	Part 4: Total finance		\$9,322.77		
		ess-related property, line 45	\$9,322.77		
60.		and fishing-related property, line 52	\$0.00		
61.		property not listed, line 54 +	\$0.00		
62.	Total personal pro	perty. Add lines 56 through 61	\$11,597.77	Copy personal property to	otal \$11,597.77
60	Total of all manager	ov on Schodulo A/B. Add line 55 - line CO			A44 F0= ==
ს პ.	rotal of all propert	y on Schedule A/B. Add line 55 + line 62			\$11,597.77

Official Form 106A/B Schedule A/B: Property page 7

Fill in this information to identify your case:					
Debtor 1	Tori Bianca Buch	anan			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F MICHIGAN		
Case number	19-52563				
(if known)	10 02000				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

Which got of examptions are you plaining? Check are only even if your energy is filling with you

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identity the Property You Claim as Exempt	

٠.	William Set of exemptions are you oralling	J. Officer offic offiny, eve	ir ii your spouse is iiiing with you.	
	☐ You are claiming state and federal nonba	nkruptcy exemptions.	11 U.S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)		
2.	For any property you list on Schedule A/b	3 that you claim as exe	empt, fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
	Various household goods and furnishings	\$1,400.00	\$1,400.00	11 U.S.C. § 522(d)(3)
	Location: 8268 Continental Ave., Warren MI 48089 Line from Schedule A/B: 6.1		□ 100% of fair market value, up to any applicable statutory limit	
	Various household electronics Location: 8268 Continental Ave.,	\$700.00	\$700.00	11 U.S.C. § 522(d)(3)
	Warren MI 48089 Line from Schedule A/B: 7.1		☐ 100% of fair market value, up to any applicable statutory limit	
	Various articles of used clothing Location: 8268 Continental Ave.,	\$150.00	\$150.00	11 U.S.C. § 522(d)(3)
	Warren MI 48089 Line from Schedule A/B: 11.1		☐ 100% of fair market value, up to any applicable statutory limit	
	Various rings, earrings, necklaces, bracelets, watches and other	\$25.00	\$25.00	11 U.S.C. § 522(d)(4)
	miscellaneous jewelry Line from Schedule A/B: 12.1		☐ 100% of fair market value, up to any applicable statutory limit	
	Cash on Debtor's person Line from Schedule A/B: 16.1	\$5.00	\$5.00	11 U.S.C. § 522(d)(5)
	Line Irom Soliedule A/D. 19.1		100% of fair market value, up to any applicable statutory limit	

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.				
	Checking: Christian Financial Credit Union	\$15.00		\$15.00	11 U.S.C. § 522(d)(5)			
	Balance approximate on date of filing Line from <i>Schedule A/B</i> : 17.1			100% of fair market value, up to any applicable statutory limit				
	Membership Share Account: Christian Financial Credit Union	\$2.50		\$2.50	11 U.S.C. § 522(d)(5)			
	Balance approximate on date of filing Line from <i>Schedule A/B</i> : 17.2			100% of fair market value, up to any applicable statutory limit				
	Thrift Saving: Thrift Savings Plan through employer	\$6,694.94		\$6,694.94	11 U.S.C. § 522(d)(10)(E)			
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit				
	Security Deposit: Security Deposit on hand with landlord	\$350.00		\$350.00	11 U.S.C. § 522(d)(5)			
	Line from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit				
	Federal: Anticipated 2019 Income Tax Refund	\$1,755.33		\$1,755.33	11 U.S.C. § 522(d)(5)			
	Market Value based on prorated 2018 Income Tax Refund Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit				
	State: Anticipated 2019 Income Tax Refund	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)			
	Market Value based on prorated 2018 Income Tax Refund Line from Schedule A/B: 28.2			100% of fair market value, up to any applicable statutory limit				
	Term life insurance through employer	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)			
	Beneficiary: Alfonza Abdullah-Buchanan Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit				
3.	3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) No							
	☐ Yes. Did you acquire the property covere ☐ No	d by the exemption wi	ithin 1,	215 days before you filed this case	?			
	☐ Yes							

Fill in this information	tion to identify you	ur case:				
Debtor 1	Tori Bianca Bu		Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name Last	Name			
United States Bankı	ruptcy Court for the	EASTERN DISTRICT OF MICHIGAN	1			
Case number 19	-52563					
(if known)	02000				☐ Che	ck if this is an
					ame	nded filing
Official Form	106D					
		. \A/I O - O		.		
Schedule D	: Creditors	Who Have Claims Sec	cured I	by Propert	У	12/15
		If two married people are filing together, bot out, number the entries, and attach it to this				
1. Do any creditors ha	ve claims secured b	y your property?				
■ No. Check th	is box and submit t	his form to the court with your other scheo	dules. You	have nothing else t	o report on this form	
_	I of the information					
Part 1: List All S	Secured Claims					
		more than one secured claim, list the creditor so	enarately	Column A	Column B	Column C
for each claim. If more	than one creditor ha	is a particular claim, list the other creditors in Pa ical order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1.		Describe the property that secures the cla	aim:			
Creditor's Name	_					
		As of the date you file, the claim is: Check a	all that			
		apply. Contingent				
Number Street Ci	ty, State & Zip Code	Unliquidated				
rumbor, euroet, e.	y, otate a z.p code	☐ Disputed				
Who owes the debt	? Check one	Nature of lien. Check all that apply.				
Debtor 1 only	. Oncok onc.	☐ An agreement you made (such as mortga	age or			
Debtor 2 only		secured car loan)	igo oi			
Debtor 1 and Debtor	or 2 only	☐ Statutory lien (such as tax lien, mechanic'	's lien)			
☐ At least one of the		☐ Judgment lien from a lawsuit	0 11011)			
☐ Check if this claim community debt		Other (including a right to offset)				
Date debt was incurr	ed	Last 4 digits of account number				
Add the dollar value	e of your entries in C	Last 4 digits of account number Column A on this page. Write that number he the dollar value totals from all pages.	ere:			

Fill in this informa	ation to identify your case:					
Debtor 1	Tori Bianca Buchanan					
Debtor 2	First Name M	iddle Name La	ast Name			
(Spouse if, filing)	First Name M	iddle Name La	ast Name			
United States Banl	kruptcy Court for the: EASTE	ERN DISTRICT OF MICHIG	AN			
Case number 19	9-52563					
(if known)	5-32303				☐ Check	c if this is an
					amen	ded filing
Official Form	106E/F					
	F: Creditors Who Ha	ave Unsecured Cl	aims			12/15
any executory contra Schedule G: Executo Schedule D: Creditor left. Attach the Conti name and case numl	accurate as possible. Use Part 1 f acts or unexpired leases that coul ory Contracts and Unexpired Leas rs Who Have Claims Secured by P inuation Page to this page. If you l ber (if known).	d result in a claim. Also list e es (Official Form 106G). Do no roperty. If more space is need have no information to report	executory contract ot include any cred ded, copy the Par	ets on Schedule A/B: F editors with partially s rt you need, fill it out, i	Property (Official Forecured claims that number the entries	rm 106A/B) and on are listed in in the boxes on the
1. Do any creditor	s have priority unsecured claims	against you?				
☐ No. Go to Pa	rt 2.					
Yes.						
identify what type possible, list the Part 1. If more th	priority unsecured claims. If a crect of claim it is. If a claim has both prictal order accordinate in alphabetical order accordinate one creditor holds a particular clain of each type of claim, see the instance.	ority and nonpriority amounts, lising to the creditor's name. If you aim, list the other creditors in Pa	st that claim here a have more than twart 3.	and show both priority a	nd nonpriority amour	nts. As much as
2.1 City of D	etroit	Last 4 digits of account no	umber 5677	\$1,500.00	\$0.00	\$1,500.00
•	ditor's Name			<u> </u>	-	_
Departm	etroit Finance	When was the debt incurr	red? 2015		-	
Treasury						
	vard Ave Room 120					
Detroit, Number Str	WI 48226 eet City State Zip Code	As of the date you file, the	e claim is: Check	all that apply		
	the debt? Check one.	☐ Contingent	, Glamino. Oncor	ан ина арргу		
Debtor 1 on	ly	☐ Unliquidated				
Debtor 2 on	lv					
	d Debtor 2 only	☐ Disputed Type of PRIORITY unsecu	ırad claim:			
_	of the debtors and another	☐ Domestic support obliga				
_		■ Taxes and certain other		a government		
	is claim is for a community debt ibject to offset?	☐ Claims for death or pers	•	•		
■ No	ibject to offset:	Other. Specify	onar injury write y	od were intoxicated		
☐ Yes		. ,	ne Taxes			_
Port 2: Liet All	of Your NONPRIORITY Unsec	oured Claima				
	s have nonpriority unsecured clai					
_	e nothing to report in this part. Subm	it this form to the court with your	other schedules.			
Yes.						
unsecured claim,	nonpriority unsecured claims in the list the creditor separately for each reholds a particular claim, list the other controls.	claim. For each claim listed, ide	entify what type of	claim it is. Do not list cla	aims already included	d in Part 1. If more

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 10

Total claim

Debtor 1	Tori Bianca Buchanan	Case number (if known) 19-52563					
	Advance America	Last 4 digits of account number 4850	\$454.61				
1	Nonpriority Creditor's Name 1626 N. Perry Road Unit 4 Pontiac, MI 48340	When was the debt incurred? 8/2019					
1	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
V	Who incurred the debt? Check one.						
I	Debtor 1 only	☐ Contingent					
[Debtor 2 only	☐ Unliquidated					
[Debtor 1 and Debtor 2 only	☐ Disputed					
[At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
[☐ Check if this claim is for a community	☐ Student loans					
	lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
I	No	\square Debts to pension or profit-sharing plans, and other similar debts					
[□Yes	■ Other. Specify _ Unsecured Loan					
	Amcol Systems Inc	Last 4 digits of account number 7079	\$150.00				
1	Nonpriority Creditor's Name	When was the debt incurred? Opened 03/19					
	Columbia, SC 29210 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	As of the date you me, the claim is. Offect all that apply					
ı	Debtor 1 only	☐ Contingent					
_	□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Type of NONPRIORITY unsecured claim:						
_							
_							
_	☐ Check if this claim is for a community	☐ Student loans					
c	debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
_	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	■ NO						
[☐ Yes	Collection Attorney St John Macomb-Oakland Hospita					
	Associates Financial Solutions	Last 4 digits of account number 2288	\$185.00				
	Nonpriority Creditor's Name P.O. Box 39	When was the debt incurred? 8/2016					
F	Pleasant Lake, MI 49272						
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
_	Who incurred the debt? Check one.						
ı	Debtor 1 only	☐ Contingent					
[Debtor 2 only	☐ Unliquidated					
[Debtor 1 and Debtor 2 only	☐ Disputed					
[At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a community	☐ Student loans					
	lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
_	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	⊒ Yes	Collection Account on behalf of Michigan Neurology Institute					

Debtor	1 Tori Bianca Buchanan		Case number (if known) 19-52563			
4.4	Bmg Money Nonpriority Creditor's Name	Last 4 digits of account number	0270	\$3,692.00		
	1221 Brickell Ave Miami, FL 33131 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim	Opened 4/19/19 Last Active 7/26/19 s: Check all that apply			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	igations arising out of a separation agreement or divorce that you did not as priority claims			
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify	g pians, and other similar debts			
4.5	Bmg Money Nonpriority Creditor's Name	Last 4 digits of account number	0238	\$1,249.00		
	1221 Brickell Ave Miami, FL 33131	When was the debt incurred?	Opened 7/23/18 Last Active 11/30/18			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only □ Contingent					
	Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?		insecured claim: of a separation agreement or divorce that you did not			
	No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Unsecured				
4.6	Check 'n Go Nonpriority Creditor's Name	Last 4 digits of account number	5677	\$676.61		
	26210 Eastgate Blvd Roseville, MI 48066 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did r				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Unsecured	Loan			

Debte	or 1 Tori Bianca Buchanan		Case number (if known) 19-52563				
4.7	Christian Financial Cu Nonpriority Creditor's Name	Last 4 digits of account number	0237	\$4,989.00			
	18441 Utica Rd Roseville, MI 48066	When was the debt incurred?	Opened 06/19 Last Active 7/16/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Unsecured					
4.8	Christian Financial Cu	Last 4 digits of account number	0580	\$503.00			
	Nonpriority Creditor's Name 18441 Utica Road Roseville, MI 48066	When was the debt incurred?	Opened 02/16 Last Active 7/26/19				
	Number Street City State Zip Code	As of the date you file, the claim					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	lacktriangle At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	l				
4.9	Credit One Bank Na Nonpriority Creditor's Name	Last 4 digits of account number	9940	\$316.00			
	Po Box 98872 Las Vegas, NV 89193	When was the debt incurred?	Opened 05/18 Last Active 7/02/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure					
	Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Credit Card					

4.1 0	Diversified Consultants Inc.	Last 4 digits of account number	0001	\$699.83	
	Nonpriority Creditor's Name PO BOX 1391	When was the debt incurred?	2017		
	Southgate, MI 48195 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	•	,		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
		_ Collection	Account on behalf of Verizon		
	Yes	Other. Specify Wireless			
4.1	Grosse Pointe Urgent Care	Last 4 digits of account number	2494	\$35.00	
1	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ00.00	
	20311 Mack Ave. Ste. 3	When was the debt incurred?	2016		
	Grosse Pointe, MI 48236		in Oharkall shadarah		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан tnat apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	□Yes	Other. Specify Medical bil	<u> </u>		
4.1	Henry Ford Health System	Last 4 digits of account number	1482	\$40.00	
2	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ-0.00	
	PO Box 553920 Detroit, MI 48255	When was the debt incurred?	2017		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	<u> </u>		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify Medical bil	I		

Debtor	1 Tori Bianca Buchanan		Case number (if known) 19-52563		
4.1	Henry Ford Health System	Last 4 digits of account number	1482	\$90.00	
	Nonpriority Creditor's Name PO Box 553920 Detroit, MI 48255	When was the debt incurred?	7/2019		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	I claim:		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify Medical bill			
4.1	Kashable Llc Nonpriority Creditor's Name	Last 4 digits of account number	5010	\$1,209.00	
	275 Madison Ave New York, NY 10016	When was the debt incurred?	Opened 2/07/19 Last Active 7/26/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims			
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify Unsecured			
4.1 5	L J Ross Associates In	Last 4 digits of account number	0427	\$100.00	
	Nonpriority Creditor's Name P O Box 1838 Ann Arbor, MI 48103	When was the debt incurred?	Opened 01/18		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharin	sharing plans, and other similar debts		
	Yes	Other. Specify Collection	Attorney Wsu Dept Of Pathology		

ebt	or 1 Tori Bianca Buchanan		Case number (if known) 19-52563		
.1	Opploans/finwise	Last 4 digits of account number	4811	\$1,709.0	
	Nonpriority Creditor's Name		Opened 06/40 Leet Active		
	11 E. Adams Chicago, IL 60603	When was the debt incurred?	Opened 06/19 Last Active 7/26/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	_	☐ Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	■ Other. Specify Unsecured			
.1	Ryan Foot & Ankle Clinic, P.C.		8640	\$40.0	
	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ-0.0	
	25511 Van Dyke, Suite 100 Center Line, MI 48015	When was the debt incurred?	05/2018		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	■ Other. Specify Medical bill	<u> </u>		
.1	St John Macomb - Oakland Hospital	Last 4 digits of account number	8097	\$125.0	
	Nonpriority Creditor's Name				
	PO Box 773123 3123 Solutions Center	When was the debt incurred?	4/2018		
	Chicago, IL 60677-3001 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.	, , 			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
		Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another	☐ Student loans			
	☐ Check if this claim is for a community debt				
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		

■ No

☐ Yes

■ Other. Specify _Medical bill

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

St. John Macomb - Oakland Hospital	Last 4 digits of account number	8861	\$2
Nonpriority Creditor's Name 28000 Dequindre Warren, MI 48092	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
gept Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Medical bil		
Syncb/walmart	Last 4 digits of account number	4411	\$5
Nonpriority Creditor's Name	_		
Po Box 965024 Orlando, FL 32896	When was the debt incurred?	Opened 11/14 Last Active 7/26/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
□Yes	Other. Specify Charge Acc	count	
University Physician Group	Last 4 digits of account number	8210	\$1
Nonpriority Creditor's Name 16054 Collections Center Dr.	When was the debt incurred?	8/2017	
Chicago, IL 60693 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
— 110	= = = = = = = = = = = = = = = = = = =	J 1 ,	

Schedule E/F: Creditors Who Have Unsecured Claims

Claims for death or personal injury while you were intoxicated

Other. Add all other priority unsecured claims. Write that amount here.

0.00

Debtor 1 Tori Bianca Buchanan Case number (if known) 19-52563 6e. Total Priority. Add lines 6a through 6d. 6e. 1,500.00 Total Claim Student loans 6f. 0.00 Total claims from Part 2 Obligations arising out of a separation agreement or divorce that 0.00 6g. you did not report as priority claims
Debts to pension or profit-sharing plans, and other similar debts 6h. 6h. 0.00

Fill in this infor				
Debtor 1	Tori Bianca Buch	anan		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F MICHIGAN	
Case number	19-52563			
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

.1 NHL Property Management 19785 W. Twelve Mile Rd. PMB 173 Southfield, MI 48075 **One Year Residential Lease**

Fill in this infor	mation to identify your	case:			
Debtor 1	Tori Bianca Buch				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN		
Case number (if known)	19-52563				☐ Check if this is an amended filing
Official Fo	orm 106H • H: Your Cod	ebtors			12/15
people are filing fill it out, and nu your name and o	rogether, both are equal simber the entries in the case number (if known)	ally responsible for supp boxes on the left. Attach . Answer every question	olying correct information the Additional Page to t	n. If more space is this page. On the to	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
□ No ■ Yes					
			operty state or territory? erto Rico, Texas, Washing		ty states and territories include)
■ No. Go to		use, or legal equivalent live	with you at the time?		
in line 2 aga	ain as a codebtor only i), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make su	re you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fil
	nn 1: Your codebtor Number, Street, City, State and ZI	P Code		Column 2: The cr Check all schedul	editor to whom you owe the debt les that apply:
8268	nza Abdullah-Buchar Continental Ave. en, MI 48089	nan		☐ Schedule D, ■ Schedule E/F ☐ Schedule G _ City of Detroit	, line <u>2.1</u>

Fill	in this information t	o identify your ca	ISE:									
Del	otor 1	Tori Bianca	Buchanan									
	otor 2 ouse, if filing)											
Uni	ted States Bankrup	tcy Court for the:	EASTERN DISTRICT	OF MICH	IIGAN		_					
Cas	se number 19-	-52563						Chec	k if this is:	:		
(If kr	nown)							□ A	n amende	ed filing		
_	· · · · -										ing postpetition of following date:	chapter
0	fficial Form	<u> 1061</u>						M	M / DD/ Y	YYYY		
S	chedule I: `	Your Inco	ome									12/15
atta	ch a separate she	et to this form. (r spouse is not filing wi On the top of any addition	onal page	es, write you				mber (if	known).	Answer every	
	information.	•		Debtor	1				Debtor 2	2 or non-	filing spouse	
	If you have more than one job, attach a separate page with information about additional		Employment status	■ Emp	oloyed				■ Empl	oyed		
			, ,	☐ Not	employed				☐ Not e	mployed		
	employers.		Occupation	City C	arrier				City Ca	rrier		
	Include part-time, self-employed wo		Employer's name	USPS					USPS			
	Occupation may i or homemaker, if		Accounting Service Center 2825 Lone Oak Pkwy Saint Paul, MN 55121-9640					Accounting Service Center 2825 Lone Oak Pkwy Saint Paul, MN 55121-9640				
			How long employed th	nere?	5 years				_2	2 month	s	
Par	Give De	tails About Mon	thly Income									
	mate monthly incouse unless you are		ate you file this form. If y	you have	nothing to re	port for	any l	line, write	\$0 in the	space. I	nclude your non	-filing
	u or your non-filing e space, attach a se		re than one employer, co this form.	mbine the	e information	for all	emplo	oyers for	that perso	on on the	lines below. If y	ou need
								For Deb	otor 1		ebtor 2 or iling spouse	
2.			ry, and commissions (be calculate what the monthly			2.	\$	4,	808.94	\$	2,384.81	
3.	Estimate and list	t monthly overti	me pay.			3.	+\$		0.00	+\$	0.00	
										1		

4. **\$ 4,808.94**

\$ 2,384.81

4. Calculate gross Income. Add line 2 + line 3.

Debtor 1 Tori Bianca Buchanan Case number (if known) 19-52563 For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 4.808.94 2.384.81 List all payroll deductions: Tax, Medicare, and Social Security deductions 999.03 5a. 388.92 5b. Mandatory contributions for retirement plans 5b. 164.73 0.00 Voluntary contributions for retirement plans 5c. 5c. \$ 0.00 0.00 5d. Required repayments of retirement fund loans 5d. 0.00 0.00 5e. Insurance 5e. \$ 0.00 483.17 5f. **Domestic support obligations** 5f. \$ \$ 0.00 0.00 5g. **Union dues** \$ \$ 5g. 67.60 63.01 Other deductions. Specify: Thrift Savings Plan 5h. 5h.+ \$ 187.20 \$ 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1.901.73 451.93 6. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,907.21 1,932.88 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. 0.00 0.00 8b. Interest and dividends 8b. \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 0.00 8d. **Unemployment compensation** 8d. \$ 0.00 0.00 **Social Security** 8e. 8e. 0.00 0.00 Other government assistance that you regularly receive 8f. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. 0.00 \$ 0.00 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 Other monthly income. Specify: 8h. 8h.+ \$ 0.00 \$ 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 0.00 \$ 0.00 \$ 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 2,907.21 1,932.88 \$ 4,840.09 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 0.00 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.

4,840.09

Combined monthly income

12.

Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it

13. Do you expect an increase or decrease within the year after you file this form?

applies

Yes. Explain:

E-11	in this info	tion to identif	N. 15 0.00			Ī			
FIII	in this informa	tion to identify yo	our case:						
Deb	otor 1	Tori Bianca	Buchana	n			k if this is:		
Deb	otor 2					_	An amended filing A supplement shov	ving postpetition chapter	
(Spo	ouse, if filing)						13 expenses as of		
Unit	ted States Bankr	uptcy Court for the	: EASTE	RN DISTRICT OF MICHIC	SAN	MM / DD / YYYY			
1	se number 19	-52563							
	#:a:a! F a	was 400 l							
	fficial Fo								
		J: Your			("l" ((l l-			12/15	
info	ormation. If m		eded, atta	If two married people and the chanother sheet to this n.					
Par	t 1: Descr	ibe Your House	hold						
1.	Is this a join								
	■ No. Go to	line 2.							
			in a separ	ate household?					
		_	at file Offici	al Form 106 L 2. Fymanau	o for Conorato House	abald of Dob	or 2		
			st lile Offici	al Form 106J-2, Expenses	s for Separate House	eriola di Debi	01 2.		
2.	Do you have	e dependents?	☐ No						
	Do not list De Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?	
	Do not state							□ No	
	dependents i	names.			Son		3	■ Yes	
					Son		5	□ No ■ Yes	
								■ res □ No	
								☐ Yes	
								□ No	
•	_							☐ Yes	
3.	expenses of	enses include people other the your depende	han 👝	No Yes					
Por	<u> </u>	ate Your Ongoi		y Evnoncos					
Est	imate your ex penses as of a	penses as of yo	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp					
app	olicable date.								
				government assistance i cluded it on <i>Schedule I:</i> \					
	ficial Form 10		u nave m	iluded it on Schedule I.	rour income		Your expe	enses	
4.		r home owners d any rent for the		ses for your residence. I r lot.	nclude first mortgag	e 4. \$		780.00	
	If not includ	ed in line 4:							
	4a. Real e	state taxes				4a. \$		0.00	
		rty, homeowner's	s, or renter	's insurance		4b. \$		100.00	
		•		ipkeep expenses		4c. \$		50.00	
E		owner's associat			umo oquity looss	4d. \$ 5. \$		0.00	
5.	Additional h	nortgage payme	ents for yo	our residence, such as ho	ine equity loans	5. \$		0.00	

Official Form 106J Schedule J: Your Expenses 19-52563-pjs Doc 13 Filed 09/12/19 Entered 09/12/19 19:07:59 Page 27 of 41

Deb	tor 1 Tori Bianca Buchanan	Case number (if known)	19-52563
6.	Utilities:		
٥.	6a. Electricity, heat, natural gas	6a. \$	250.00
	6b. Water, sewer, garbage collection	6b. \$	100.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	295.00
	6d. Other. Specify:	6d. \$	0.00
.	Food and housekeeping supplies	7. \$	1,050.00
3.	Childcare and children's education costs	8. \$	433.00
	Clothing, laundry, and dry cleaning	9. \$	260.00
	Personal care products and services	10. \$	110.00
1.	Medical and dental expenses	11. \$	100.00
	Transportation. Include gas, maintenance, bus or train fare.	π. Ψ	100.00
۷.	Do not include car payments.	12. \$	495.00
3.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
	Charitable contributions and religious donations	14. \$	0.00
	Insurance.	🗸	0.00
٠.	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a. \$	0.00
	15b. Health insurance	15b. \$	0.00
	15c. Vehicle insurance	15c. \$	275.00
	15d. Other insurance. Specify:	15d. \$	0.00
ร	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		0.00
٠.	Specify:	16. \$	0.00
7.	Installment or lease payments:		<u> </u>
•	17a. Car payments for Vehicle 1	17a. \$	350.00
	17b. Car payments for Vehicle 2	17b. \$	0.00
	17c. Other. Specify: Non-Filing Spouse Gym Membership	17c. \$	50.00
	17d. Other. Specify:	17d. \$	0.00
8.	Your payments of alimony, maintenance, and support that you did not report as		
٠.	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		0.00
9.	Other payments you make to support others who do not live with you.	\$	0.00
	Specify:	19.	
0.	Other real property expenses not included in lines 4 or 5 of this form or on School	edule I: Your Income.	
	20a. Mortgages on other property	20a. \$	0.00
	20b. Real estate taxes	20b. \$	0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e. Homeowner's association or condominium dues	20e. \$	0.00
1.	Other: Specify:	21. +\$	0.00
•			0.00
2.	Calculate your monthly expenses		
	22a. Add lines 4 through 21.	\$	4,798.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.	\$	4,798.00
3	Calculate your monthly net income.		
J.	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	4 940 00
	23b. Copy your monthly expenses from line 22c above.	23a. \$ 23b\$	4,840.09
	23b. Copy your monthly expenses from the 22c above.	ZSD\$	4,798.00
	23c. Subtract your monthly expenses from your monthly income.		
	230. Subtract your monthly expenses from your monthly income.	١	40.00
	The result is your monthly net income.	23c. \$	42.09

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

☐ Yes.

Explain here: Lines #15(c) and #17(a) reflect Debtor's anticipated auto insurance and loan payments once she is able to finance a reliable vehicle. Debtor is currently sharing a 2006 Ford Windstar with her non-filing spouse.

Official Form 106J Schedule J: Your Expenses 19-52563-pjs Doc 13 Filed 09/12/19 Entered 09/12/19 19:07:59 Page 28 of 41

Fill in this informa	ation to identify your	case:							
Debtor 1	Tori Bianca Buch	anan							
	First Name	Middle Name	Last Name						
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name						
United States Ban	kruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN						
	9-52563								
(if known)				-	Check if this is an amended filing				
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15									
If two married peo	ple are filing togethe	r, both are equally respon	nsible for supplying correc	ct information.					
obtaining money		n connection with a bank		flaking a false statement, conditions ap to \$250,000, or impris					
Sign	Below								
Did you pay	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
■ No									
☐ Yes. Na	ame of person			Attach Bankruptcy Peti Declaration, and Signa	ition Preparer's Notice, ture (Official Form 119)				

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Tori Bianca Buchanan	X
Tori Bianca Buchanan	Signature of Debtor 2
Signature of Debtor 1	
Date September 12, 2019	Date

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fil	l in this inforn	nation to identify you	r case:				
De	btor 1	Tori Bianca Buc	hanan				
D-	htor O	First Name	Middle Name	Last Name			
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name			
Un	ited States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN			
	se number1	19-52563			_ c	heck if this is an	
					ar	mended filing	
Of	fficial Fo	rm 107					
St	atement	of Financial	Affairs for Individ	luals Filing for B	ankruptcy	4/19	
info	rmation. If m		attach a separate sheet to t		equally responsible for supp additional pages, write you		
	<u> </u>	,	rital Status and Where You	Lived Before			
1.	What is you	r current marital statu	ıs?				
	■ Married □ Not mar	ried					
2.	During the la	ast 3 years, have you	lived anywhere other than v	where you live now?			
	■ No						
	☐ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	'.		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there	
3. stat					ity property state or territory co, Texas, Washington and W		
	■ No	·				,	
	_	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ficial Form 106H).			
Pa	rt 2 Explai	n the Sources of You	r Income				
4.	Fill in the tota	al amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	all businesses, including part-		idar years?	
	□ No						
	Yes. Fill	in the details.					
			Debtor 1		Debtor 2		
			Sources of income	Gross income	Sources of income	Gross income	
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)	
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips \$38,607.5		☐ Wages, commissions, bonuses, tips		
			☐ Operating a business		☐ Operating a business		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

				D		D.L.			
				Debtor 1		Debtor 2			
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)	
	r last caler inuary 1 to	idar year: December	31, 2018)	■ Wages, commissions, bonuses, tips	\$39,772.46	☐ Wages, com bonuses, tips	☐ Wages, commissions, bonuses, tips		
				☐ Operating a business		Operating a	ousiness		
		dar year be December		■ Wages, commissions, bonuses, tips	\$38,326.82	☐ Wages, com bonuses, tips	missions,		
				☐ Operating a business		☐ Operating a	ousiness		
 Did you receive any other income during this Include income regardless of whether that inco and other public benefit payments; pensions; rewinnings. If you are filing a joint case and you have the List each source and the gross income from each No Yes. Fill in the details. 			lless of wheth fit payments; ing a joint cas he gross inco	pensions; rental income; inter e and you have income that y	amples of other income are a est; dividends; money collec- you received together, list it	alimony; child suppoted from lawsuits; only once under De	royalties; and abtor 1.		
				Debtor 1		Debtor 2			
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incorporation Describe below.		Gross income (before deductions and exclusions)	
paid that creditor. Do not include payments * Subject to adjustment on 4/01/2 Yes. Debtor 1 or Debtor 2 or both have During the 90 days before you filed No. Go to line 7. Yes List below each credit				s debts primarily consumer ebtor 2 has primarily consumer personal, family, or househol re you filed for bankruptcy, die ach creditor to whom you paieditor. Do not include payment payments to an attorney for the on 4/01/22 and every 3 years or both have primarily consumer you filed for bankruptcy, die ach creditor to whom you paiements for domestic support of this bankruptcy case.	r debts? Imer debts. Consumer debtid purpose." d you pay any creditor a total of \$6,825* or more ats for domestic support oblinis bankruptcy case. Is after that for cases filed on timer debts. d you pay any creditor a total dayou pay any creditor a total of \$600 or more an obligations, such as child support of the consumer debts.	al of \$6,825* or more pay gations, such as che or after the date of al of \$600 or more?	re? ments and th ild support an f adjustment. f adjustment. vou paid that Also, do not in	ne total amount you and alimony. Also, do creditor. Do not anclude payments to an	
	Creditor	's Name and	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	ayment for	
Syncb/walmart Po Box 965024 Orlando, FL 32896		06/07/2019	\$1,200.00	\$589.00	☐ Mortgag ☐ Car ☐ Credit C ☐ Loan Re ☐ Supplier ☐ Other	card			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1

Tori Bianca Buchanan

Case number (if known)

19-52563

Dei	otor 1 I ori Bianca Buchanan		Case numbe	19-52563					
Par	t 5: List Certain Gifts and Contributions	s							
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	uptcy, d	did you give any gifts with a total value of more	than \$600 per person	?				
	Gifts with a total value of more than \$600 per person		Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution.								
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value				
Par	t 6: List Certain Losses								
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?								
	■ No □ Yes. Fill in the details.								
	how the loss occurred	Include	the any insurance coverage for the loss the amount that insurance has paid. List pending not claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost				
Par	t 7: List Certain Payments or Transfers	.							
16.	consulted about seeking bankruptcy or p	reparii	id you or anyone else acting on your behalf paying a bankruptcy petition? s, or credit counseling agencies for services require		rty to anyone you				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	OU	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	Moran Law 25600 Woodward Ave Suite 201 Royal Oak, MI 48067 ecf@moranlawoffice.com		Pre-petition Chapter 7 Attorney's Fees	8/28/2019	\$300.00				
	www.debtorcc.org		Pre-filing Credit Counseling Course	8/28/2019	\$14.95				
	www.debtorcc.org Moran Law								

17.	Within 1 year before you filed for bankruptcy, di promised to help you deal with your creditors o Do not include any payment or transfer that you list	or to make payments			or transfer any prope	rty to anyone who		
	■ No							
	☐ Yes. Fill in the details.							
	Person Who Was Paid Address	Description and v transferred	alue of any pro	perty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankruptcy, of transferred in the ordinary course of your busin Include both outright transfers and transfers made a include gifts and transfers that you have already list. No	ness or financial affa as security (such as t	nirs? he granting of a					
	Yes. Fill in the details.							
	Person Who Received Transfer	Description and w	roluo of	Describe	ony proporty or	Date transfer was		
	Address	Description and v property transferr			e any property or es received or debts exchange	made		
	Person's relationship to you	· ·						
	Gloria Kincaide 20300 Schoenherr Detroit, MI 48205	2004 Chrysler Town & \$200.00 Country Condition: Poor			07/2019			
	Mother							
19.	Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protect. No Yes. Fill in the details. Name of trust	•	,,,,,			of which you are a Date Transfer was made		
						maao		
Par	t 8: List of Certain Financial Accounts, Instru	ments, Safe Deposit	Boxes, and Sto	orage Units				
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?							
	Include checking, savings, money market, or ot houses, pension funds, cooperatives, association. No				snares in banks, credit	unions, brokerage		
	Yes. Fill in the details.							
		st 4 digits of count number	Type of accountstrument	cl m	ate account was losed, sold, noved, or ansferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year cash, or other valuables?	before you filed for	bankruptcy, ar	y safe depos	sit box or other deposi	tory for securities,		
	■ No							
	Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	e contents	Do you still have it?		
		State and En Code)						

22.	Hav	e you stored property in a storage unit or p	lace other than your home within 1	year before you filed for bankruptcy	?		
		No					
		Yes. Fill in the details.					
	Naı	me of Storage Facility	Who else has or had access	Describe the contents	Do you still		
		dress (Number, Street, City, State and ZIP Code)	to it?		have it?		
			Address (Number, Street, City, State and ZIP Code)				
		-	·				
Pal	t 9:	Identify Property You Hold or Control for	Someone Lise				
23.		you hold or control any property that some comeone.	one else owns? Include any proper	ty you borrowed from, are storing fo	r, or hold in trust		
		No					
		Yes. Fill in the details.					
	Ow	ner's Name	Where is the property?	Describe the property	Value		
		dress (Number, Street, City, State and ZIP Code)	(Number, Street, City, State and ZIP Code)	досение ине ресрему			
Par	t 10:	Give Details About Environmental Inform	,				
For	the p	ourpose of Part 10, the following definitions	apply:				
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or						
		c substances, wastes, or material into the a llations controlling the cleanup of these su		awater, or other medium, including s	tatutes or		
	_	means any location, facility, or property as	, ,	law, whether you now own, operate,	or utilize it or used		
	to o	wn, operate, or utilize it, including disposal	sites.				
		ardous material means anything an environ		waste, hazardous substance, toxic	substance,		
	naza	ardous material, pollutant, contaminant, or	similar term.				
Rep	ort a	II notices, releases, and proceedings that y	ou know about, regardless of wher	they occurred.			
24.	Has	any governmental unit notified you that yo	u may be liable or potentially liable	under or in violation of an environm	ental law?		
		No					
		Yes. Fill in the details.					
	Naı	me of site	Governmental unit	Environmental law, if you	Date of notice		
	Add	dress (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)	know it			
25	Hav	e you notified any governmental unit of any	,				
-0.	· ·······	e you notified any governmental and or any	release of Hazardous material.				
		No					
		Yes. Fill in the details.					
		me of site	Governmental unit	Environmental law, if you	Date of notice		
	Add	dress (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)	know it			
26	Hav	e you been a party in any judicial or admini	strative proceeding under any envi	ronmental law? Include settlements	and orders		
-0.	····	e you been a party in any judicial or admini	Strative proceeding under any envi	Tormentariaw : morade settlements	and orders.		
		No					
		Yes. Fill in the details.					
		se Title	Court or agency	Nature of the case	Status of the		
	Cas	se Number	Name Address (Number, Street, City,		case		
			State and ZIP Code)				
Pai	t 11:	Give Details About Your Business or Cor	nnections to Any Business				
27.	With	nin 4 years before you filed for bankruptcy,	did you own a business or have an	y of the following connections to an	y business?		
		☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	either full-time or part-time			
		☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)			
Offic	ial Fo		of Financial Affairs for Individuals Filing	,	page		
					Pago		

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Deb	tor 1	Tori Bianca Buchanan		Case	e number (if known)	19-52563				
		☐ A partner in a partnership								
		☐ An officer, director, or managing ex	ecutive of a corporation							
		☐ An owner of at least 5% of the voting or equity securities of a corporation								
		No. None of the above applies. Go to F	Part 12.							
		Yes. Check all that apply above and fill	in the details below for each business	S.						
	Add	siness Name dress	Describe the nature of the business		fication number Social Security number or ITIN.					
	(Nun	nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed					
		nin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a financial statement t	to any	one about your	business? Include all financial				
		No Yes. Fill in the details below.								
	⊔ Nar		Date Issued							
		dress nber, Street, City, State and ZIP Code)								
Part	12:	Sign Below								
are to	rue a a ba	ad the answers on this Statement of Finand correct. I understand that making a inkruptcy case can result in fines up to §§ 152, 1341, 1519, and 3571.	false statement, concealing property, of	or obt	taining money or					
		Bianca Buchanan	Signature of Dokton 2							
		anca Buchanan re of Debtor 1	Signature of Debtor 2							
Date	9_8	September 12, 2019	Date							
Did y ■ No	0	attach additional pages to Your Stateme	ent of Financial Affairs for Individuals F	Filing	for Bankruptcy (Official Form 107)?				
■ N	0	Day or agree to pay someone who is not lame of Person Attach the Bankru				ial Form 119).				

United States Bankruptcy Court Eastern District of Michigan

In re	Tori B	ianca Buchanan			se No.	19-5256	3				
			Debtor(s)	Cha	apter	7					
		STATEMENT OF AT PURSUANT TO	TORNEY FOR DEE F.R.BANKR.P. 2016								
	The und	dersigned, pursuant to F.R.Bankr.P. 2016(b), states that									
1.		dersigned is the attorney for the Debtor(s) in this case.									
2.		npensation paid or agreed to be paid by the Debtor(s)	to the undersigned is:	[Check one]							
	[X]	FLAT FEE	_								
	A.	For legal services rendered in contemplation of an exclusive of the filing fee paid for services				Petition: Petition:	300.00 1,060.00				
				_		Total:	1,360.00				
	B.	Prior to filing this statement, received		_			300.00				
	C.	The unpaid balance due and payable is					1,360.00				
	[]	RETAINER									
	A.	Amount of retainer received									
	B.	The undersigned shall bill against the retainer at ar agreed to pay all Court approved fees and expense				rly rate sch	edule.] Debtor(s) have				
3.	\$ <u>0.0</u>	0 of the filing fee has been paid.									
4.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.]										
	A. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in										
	bankruptcy; B. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;										
	C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;										
	 P. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; E. Reaffirmations; 										
	Е. Г.	Rearmmations; —Redemptions;									
	G.	Other:									
		All fees governed by Fee Agreeme	nt.								
5.	By agre	ement with the debtor(s), the above-disclosed fee doe ADVERSARY PROCEEDINGS, MI		•			DEEMENITO				
	_	,	SC. WOTIONS), ⊏10, ,	SEE	FEE AG	RECIVIENTS				
5.	The sou	rce of payments to the undersigned was from: XX Debtor(s)' earnings, wages, comp	nensation for services t	performed							
	В.	Other (describe, including the ide		serrorined							
	7.	The undersigned has not shared or agreed to share,		other than wi	th mem	bers of the	undersigned's law firm				
	or	corporation, any compensation paid or to be paid exce	ept as follows:								
Dated:	Sept	ember 11, 2019	/s/	Ryan B. Mo	oran						
		·	At	torney for the	Debtor(
				/an B. Morai oran Law	n P707	53					
				600 Woodw	ard Av	е					
				ite 201	40007						
				oyal Oak, MI 48) 246-6536		moranlaw	office.com				
			' -	.,	0.						
Agreed:		ori Bianca Buchanan Bianca Buchanan									

Debtor

Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	:	Liquidation	
\$2	45	filing fee	
\$	75	administrative fee	
+ \$	15	trustee surcharge	
\$3	35	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.